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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 7	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

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**TITLE**

METHOD, APPARATUS, AND PROGRAM FOR TRANSLITERATION OF DOCUMENTS IN VARIOUS INDIAN LANGUAGES

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